

PHOTOGRAPHY CONSENT FORM AND RELEASE

guardian of (child's name)	hereby grant
permission to Youth Go and it's representatives, to to	ake and use: video,
ohotographs, and/or digital images of my child for us	se in:
-News and press releases	
-Youth Go's Social Media pages	
-Youth Go's website	
-Educational Materials	
-Printed and Electronic Publications	
-Printed Material at the Center	
agree that my child's name and identity may be rev	ealed in descriptive text or
commentary in connection with the image(s). I autho	orize the use of these images
without compensation to me. All negatives, prints, d	igital reproductions and shal
be the property Youth Go.	
(Date)	
, succi	
(Signature of Parent or Guardian)	
/ A d d v a a a \	
(Address)	
City, State, Zip)	
I give consent to use my child's image	
0 , 0	
I wish to decline any use of my child's image	in all of the above mediums
I give consent to use my child's image, but w	ish to decline the use of my
child's image in the mediums listed below:	

I, (print name)_____, parent or official